

FIG. 1

2/6

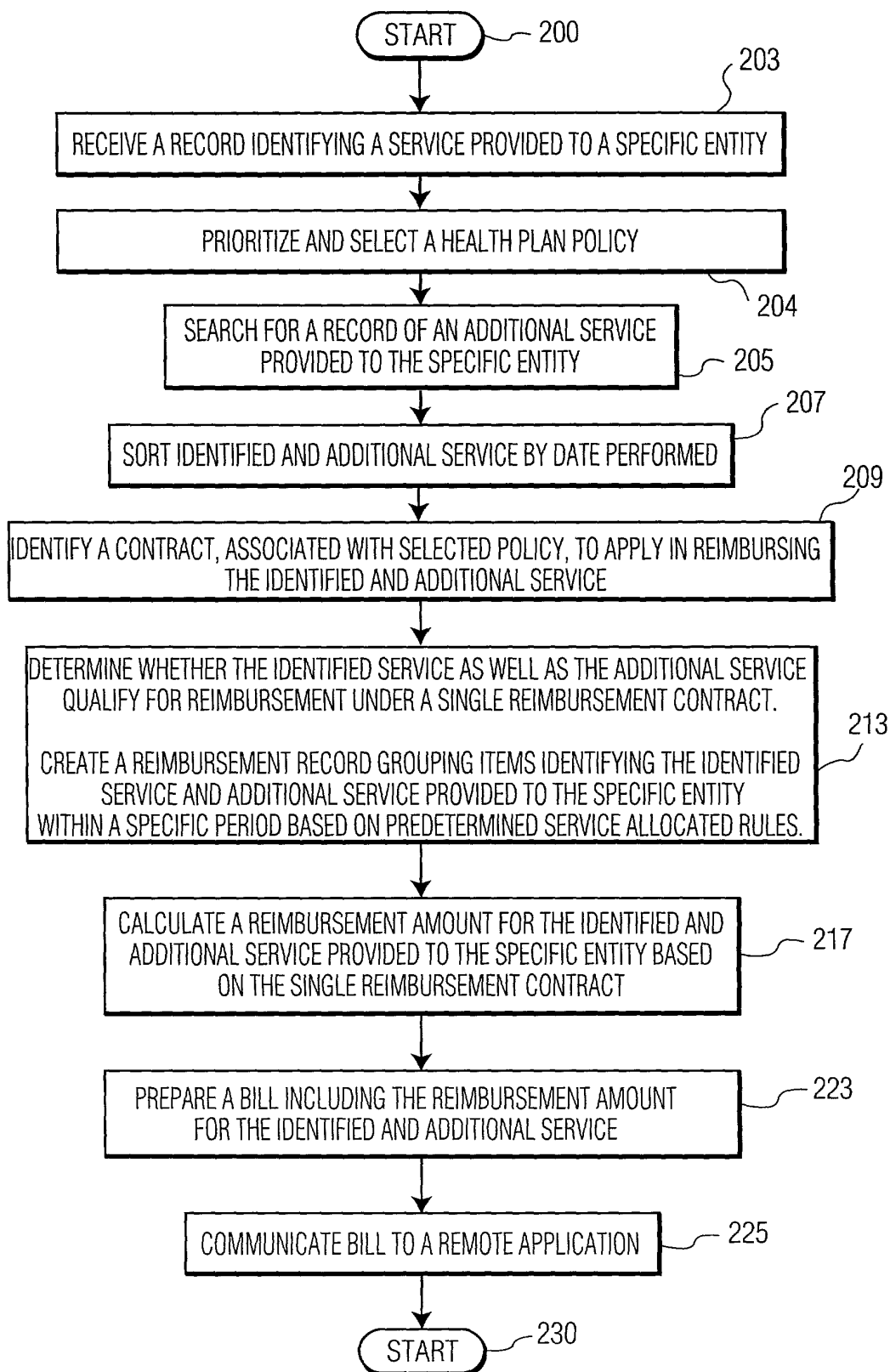


FIG. 2

300

305

TOOLBAR 1

TOOLBAR 2

PATIENT: JONES CONTRACT-HEALTH INS. CO. ID 76692

SERVICE	CHARGE AMOUNT	DATE
LAB	432:00	06/01/01
XRAY	219:00	06/01/01
ROOM1	495:00	06/03/01
<u>TOTAL</u>	<u>1146:00</u>	

17

19

21

FIG. 3

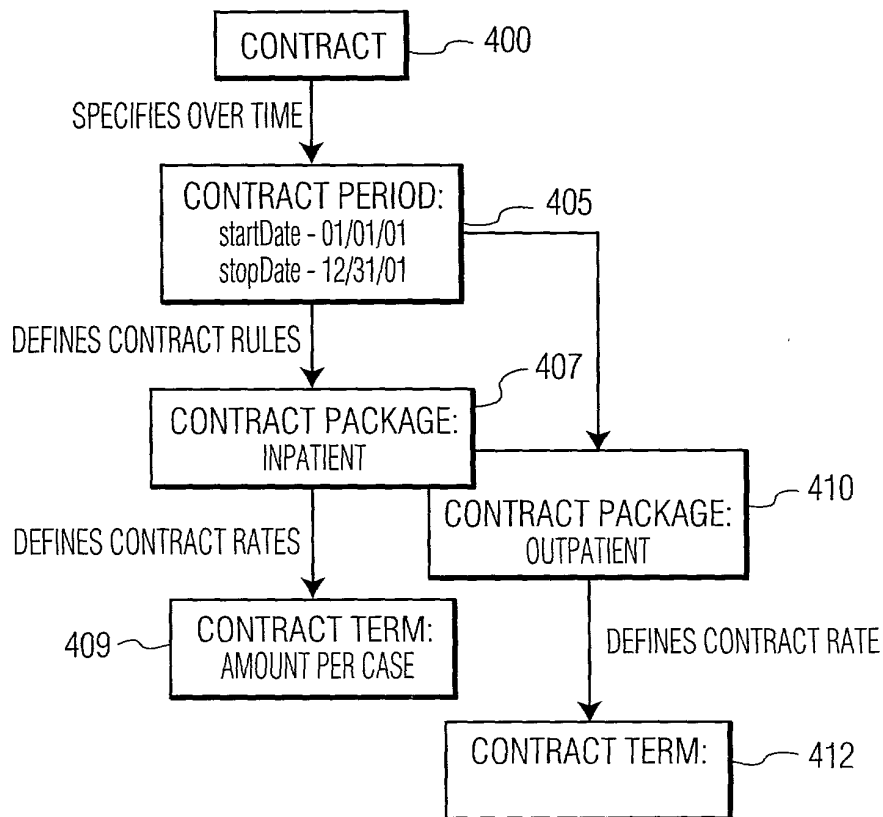


FIG. 4

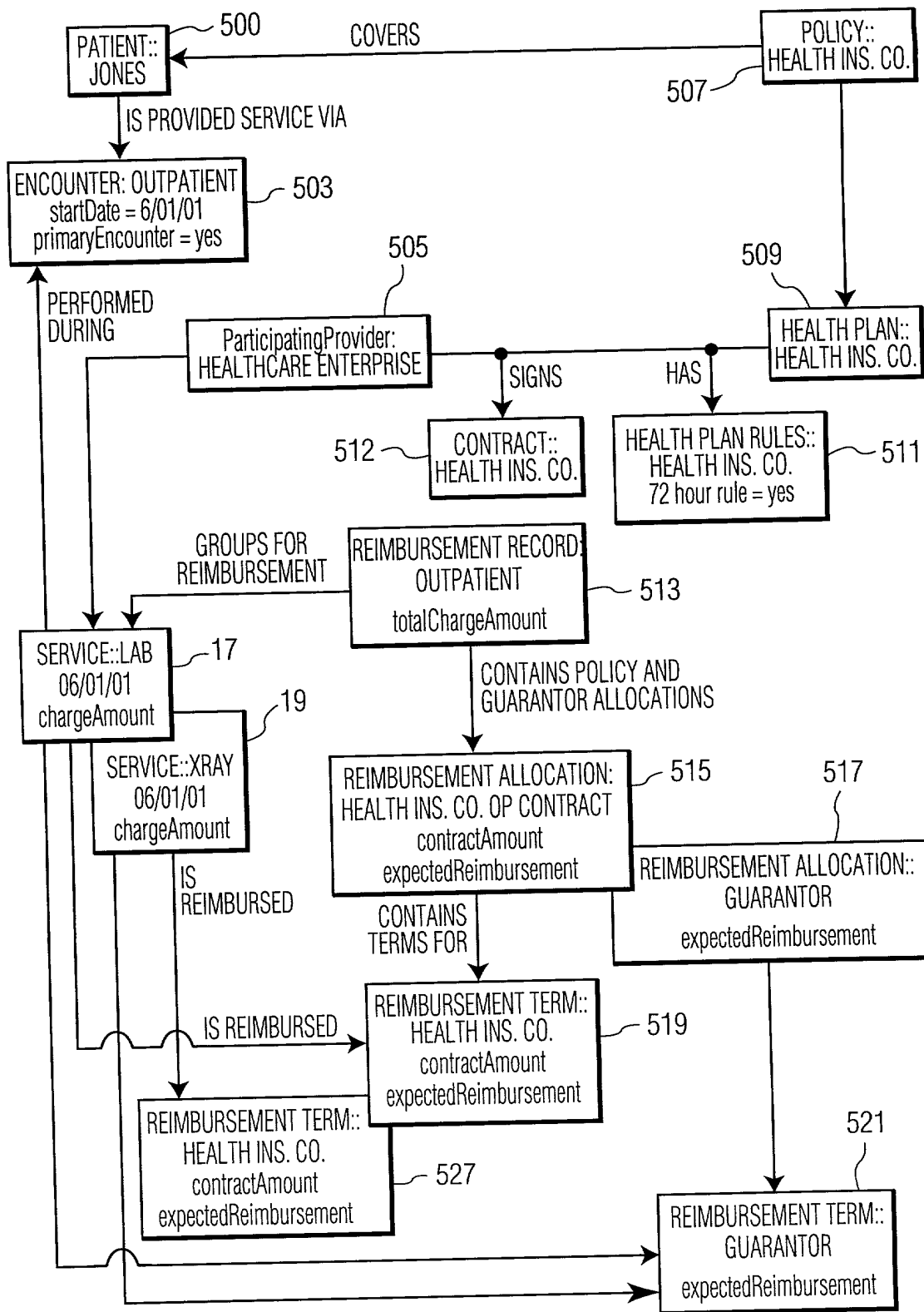
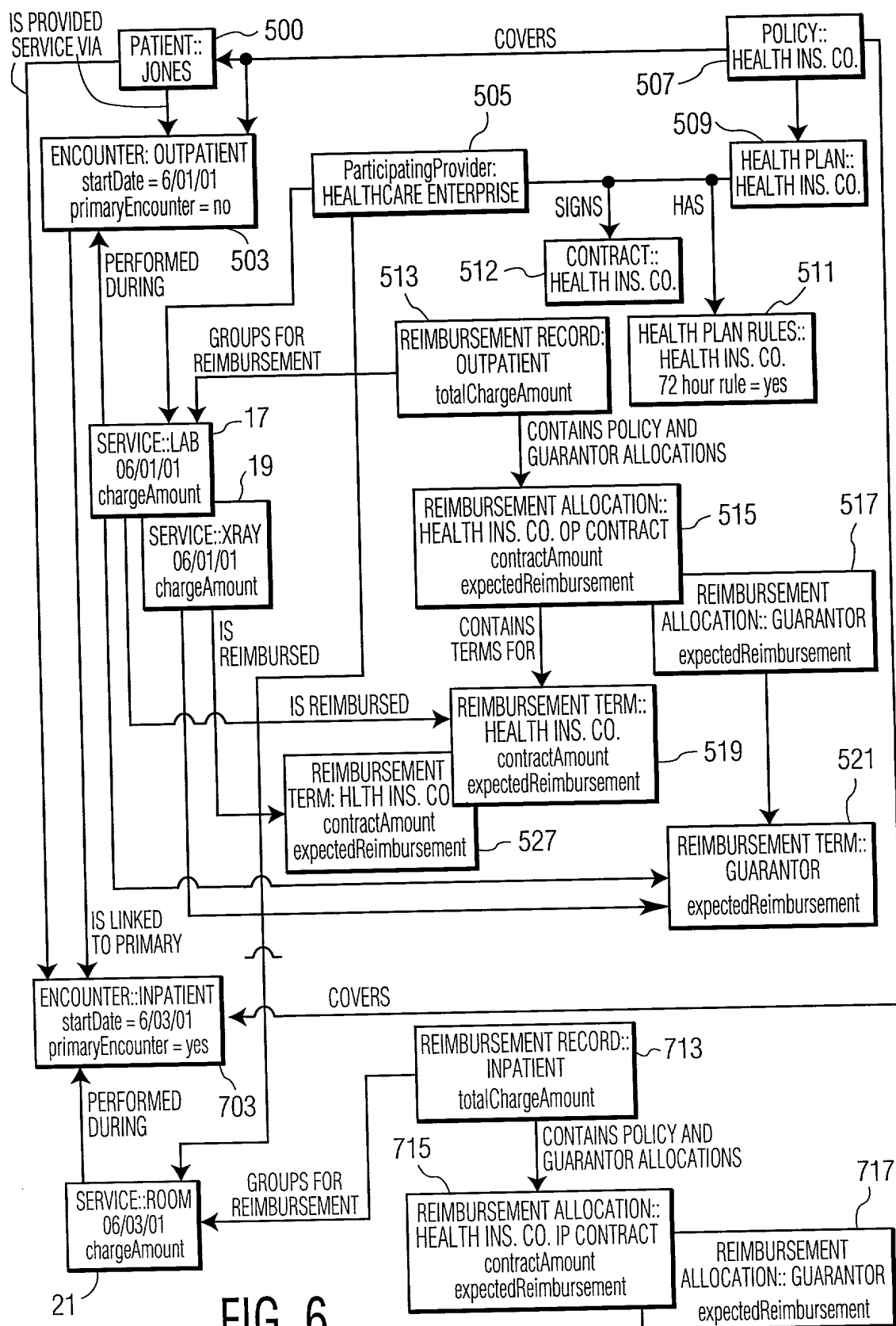


FIG. 5



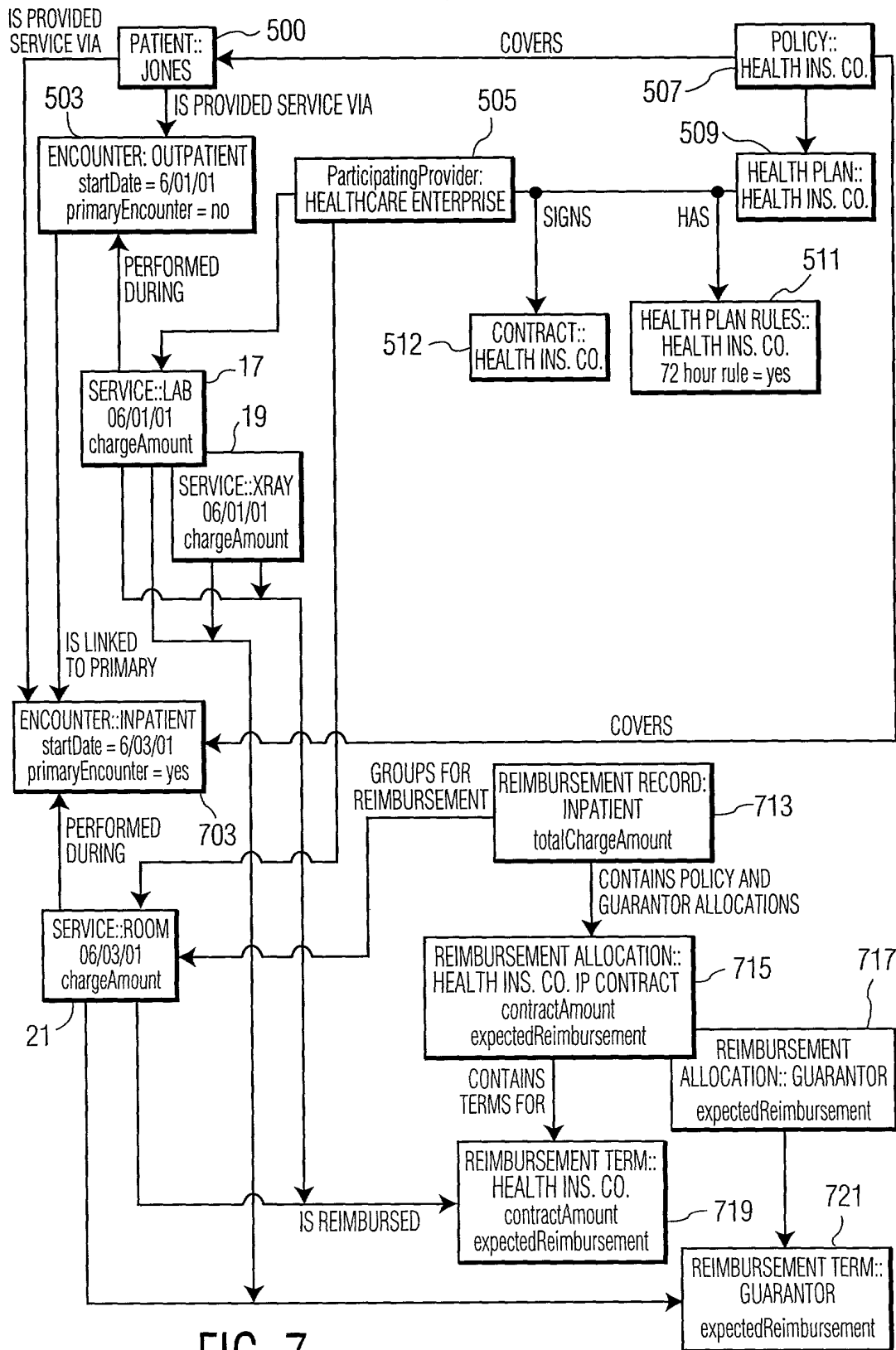


FIG. 7